KEWAUNEE CARE CENTER 1308 LINCOLN ST

KEWAUNEE 54216 Phone: (920) 388-4111		Ownership:	Limited Liability Company
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	72	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	82	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	67	Average Daily Census:	65

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Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/04) %				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	32.8
Supp. Home Care-Personal Care	No					1 - 4 Years	52.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.0	More Than 4 Years	14.9
Day Services	No	Mental Illness (Org./Psy)	10.4	65 - 74	11.9		
Respite Care	No	Mental Illness (Other)	4.5	75 - 84	23.9		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	55.2	*************	******
Adult Day Health Care No Para-, Quadra		Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.0	Full-Time Equivale	ent
Congregate Meals	No	Cancer	3.0	ĺ		Nursing Staff per 100 F	Residents
Home Delivered Meals	No	Fractures	6.0	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	14.9	65 & Over	97.0		
Transportation	No	Cerebrovascular	3.0			RNs	3.6
Referral Service	No	Diabetes	9.0	Gender	왕	LPNs	8.8
Other Services	Yes	Respiratory	3.0			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	46.3	Male	37.3	Aides, & Orderlies	42.4
Mentally Ill	No			Female	62.7		
Provide Day Programming for		İ	100.0	İ		ĺ	
Developmentally Disabled	Nο	İ		İ	100.0	İ	

## Method of Reimbursement

		edicare			edicaid itle 19		Other			Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	~	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of	
Int. Skilled Care	0	0.0	0	5	11.4	134	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	7.5	
Skilled Care	5	100.0	369	39	88.6	116	0	0.0	0	18	100.0	146	0	0.0	0	0	0.0	0	62	92.5	
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	5	100.0		44	100.0		0	0.0		18	100.0		0	0.0		0	0.0		67	100.0	

\* Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04 Admissions, Discharges, and \_\_\_\_\_\_ Deaths During Reporting Period % Needing Total Percent Admissions from: Activities of % Assistance of % Totally Number of 13.8 Daily Living (ADL) Independent One Or Two Staff Private Home/No Home Health Dependent Residents 16.4 Private Home/With Home Health 6.3 Bathing 50.7 32.8 67 Dressing 16.4
Transferring 28.4 Other Nursing Homes 3.8 50.7 32.8 67 Acute Care Hospitals 75.0 İ 46.3 25.4 67 Psych. Hosp.-MR/DD Facilities 0.0 | Toilet Use 19.4 50.7 29.9 67 Rehabilitation Hospitals 0.0 Eating 76.1 13.4 10.4 67 Other Locations 80 Total Number of Admissions Continence Special Treatments Percent Discharges To: Indwelling Or External Catheter 11.9 Receiving Respiratory Care 6.0 Private Home/No Home Health Occ/Freq. Incontinent of Bladder 29.9 Receiving Tracheostomy Care 14.8 0.0 25.4 Private Home/With Home Health 19.8 Occ/Freq. Incontinent of Bowel Receiving Suctioning 0.0 Other Nursing Homes 13.6 Receiving Ostomy Care 3.0 Acute Care Hospitals 14.8 | Mobility Receiving Tube Feeding 1.5 Psych. Hosp.-MR/DD Facilities 0.0 | Physically Restrained 1.5 Receiving Mechanically Altered Diets 38.8 Rehabilitation Hospitals 0.0 Other Locations 11.1 Skin Care Other Resident Characteristics Deaths 25.9 With Pressure Sores 10.4 Have Advance Directives 13.4 With Rashes Medications Total Number of Discharges 3.0 (Including Deaths) 81 İ Receiving Psychoactive Drugs 56.7

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	Ownership:			Bed	Size:	Lic	ensure:				
	This	Pro	prietary	50	-99	Ski	lled	Al			
	Facility	Peer	Peer Group		Group	Peer	Group		lities		
	8	% Ratio		%	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	79.3	81.9	0.97	85.5	0.93	85.9	0.92	88.8	0.89		
Current Residents from In-County	88.1	72.8	1.21	71.5	1.23	75.1	1.17	77.4	1.14		
Admissions from In-County, Still Residing	25.0	18.7	1.34	20.7	1.21	20.5	1.22	19.4	1.29		
Admissions/Average Daily Census	123.1	151.4	0.81	125.2	0.98	132.0	0.93	146.5	0.84		
Discharges/Average Daily Census	124.6	151.2	0.82	123.1	1.01	131.4	0.95	148.0	0.84		
Discharges To Private Residence/Average Daily Census	43.1	74.0	0.58	55.7	0.77	61.0	0.71	66.9	0.64		
Residents Receiving Skilled Care	100	95.3	1.05	95.8	1.04	95.8	1.04	89.9	1.11		
Residents Aged 65 and Older	97.0	94.3	1.03	93.1	1.04	93.2	1.04	87.9	1.10		
Title 19 (Medicaid) Funded Residents	65.7	71.9	0.91	69.1	0.95	70.0	0.94	66.1	0.99		
Private Pay Funded Residents	26.9	16.7	1.61	20.2	1.33	18.5	1.46	20.6	1.31		
Developmentally Disabled Residents	0.0	0.6	0.00	0.5	0.00	0.6	0.00	6.0	0.00		
Mentally Ill Residents	14.9	29.5	0.51	38.6	0.39	36.6	0.41	33.6	0.44		
General Medical Service Residents	46.3	23.5	1.97	18.9	2.44	19.7	2.35	21.1	2.20		
Impaired ADL (Mean)	47.8	46.4	1.03	46.2	1.03	47.6	1.00	49.4	0.97		
Psychological Problems	56.7	54.5	1.04	59.0	0.96	57.1	0.99	57.7	0.98		
Nursing Care Required (Mean)	7.8	7.4	1.06	7.0	1.12	7.3	1.07	7.4	1.05		